

# Naloxone Prescribing with opioid prescriptions

Naloxone is a prescription medicine that blocks the effects of opioids. It is used to treat opioid overdose by temporarily reversing the effects of opioid medicines and drugs. This helps a person to breathe again and wake up from an overdose.



# for Practitioners



## **Naloxone**

For more than 40 years, naloxone has been used to reverse the effects of opioid overdose. Timely administration of naloxone has saved thousands of lives.

- States who have enacted laws to increase access to naloxone, have experienced a reduction in opioid related deaths.
- Prescribing naloxone with opioids has been found to reduce emergency department visits.
- Patients often find the offer of a naloxone prescription acceptable.
- Prescribing naloxone with opioids does not increase liability risk.



# **Prescribing Naloxone with Opioids**

To reduce the risk of overdose deaths, practitioners are encouraged to prescribe Naloxone, and provide education about the use of Naloxone, for patients at high-risk of opioid overdose.

#### **Patients**

- Receiving opioids at a dosage of 50 morphine milligram equivalents (MME) per day or greater.
- Also prescribed benzodiazepines with opioids.
- With a non-opioid substance use disorder, report excessive alcohol use, or have a mental health disorder.

# Patients at high risk for experiencing or responding to an opioid overdose, including:

- Using heroin, illicit synthetic opioids or misusing prescription opioids.
- Using other illicit drugs such as stimulants, including methamphetamine
   and cocaine, which could potentially be contaminated with illicit synthetic opioids such as fentanyl.
- Receiving treatment for opioid use disorder, including medication-assisted treatment with methadone, buprenorphine, or naltrexone.

A patient is at high risk for opioid-induced morbidity or mortality, based on factors and combinations of factors such as medical and behavioral comorbidities, polypharmacy, current substance use disorder or abuse, aberrant behavior, dose of opioids, or the use of any concurrent central nervous system depressant.

The U.S. Surgeon General recently issued an advisory urging Americans to carry naloxone for themselves, friends, or family at risk of an opioid overdose.



# WHAT IS NALOXONE?

Naloxone is a medication designed to rapidly reverse opioid overdose.

Available in three FDA-approved formulations: injectable, autoinjectable and prepackaged nasal spray.

HHS.Gov/opioids



# **Educating Patients through Conversation**

While opioids have an appropriate role in pain management, patients may not recognize that their opioid medication could put them at risk for respiratory depression leading to potential anoxic brain injury or death.

- Discuss how to safely take their opioid medication and how to be prepared in case of an opioid-induced emergency.
- Co-prescribing naloxone may help patients become more aware of the dangers of opioid misuse and potential overdose.
- Even if patients think an opioid overdose can't happen to them, repeat the importance of being prepared.



# **Starting the Conversation**

As a prescriber, discuss with patients how to appropriately take opioid prescriptions and how to be prepared in case of an opioid-induced emergency. Here are some conversation starters that can lead to an open and informative dialogue with patients about their opioid prescriptions and the role of naloxone.

- "Let's discuss the benefits and risks associated with taking opioids. While opioids can
  provide effective pain relief, there are risks, such as the possibility for accidental
  misuse or misdosing."
- "I see you may be taking sedating medications called benzodiazepines in addition
  to your opioid prescription. This combination may have an effect on your body's
  response to these medications and may increase your risk for a serious, life-threatening
  reaction."
- "It may be tough to keep track of multiple doses in a day. Have you ever forgotten when you took your last opioid dose?"
- "Too much opioid medicine in your system can affect your breathing, a sign of an opioid overdose. We need to work together to manage your pain with opioids. As a precaution, I would like you to have an emergency treatment available to help reverse the effects of an opioid overdose while waiting for emergency medical care to arrive."
- "Is there a family member, caregiver, or close friend who could help in case of an opioid emergency? Do they know the signs of an opioid-related emergency?"
   Do you have an at-home plan in place, in case of an opioid-related emergency?"

Even if a patient thinks an opioid overdose can't happen to them, repeat the importance of being prepared with Naloxone.



# **Key Facts**

- Naloxone can reverse the life-threatening respiratory depression associated with opioid overdose.
- A variety of naloxone products (nasal spray, injection, auto-injection) are available
  to respond to an overdose. Most health insurance plans, including Medicaid and
  Medicare plans cover at least one form of naloxone.

# **HELP SAVE LIVES: Prescribe naloxone to high risk patients**

# 2018 Naloxone Co-prescribing Requirements by Profession



#### **ARNPs**

WAC 246-840-4980 Co-prescribing of naloxone. (1) The advanced registered nurse practitioner shall confirm or provide a current prescription for naloxone when fifty milligrams MED or above, or when prescribed to a high-risk patient.(2) The advanced registered nurse practitioner should counsel and provide an option for a current prescription for naloxone to patients being prescribed opioids as clinically indicated.



#### **Dentists**

<u>WAC 246-817-977</u> Co-prescribing of naloxone. The dentist shall confirm or provide a current prescription for naloxone or refer the patient to a pharmacist for further counseling and evaluation when opioids are prescribed to a high-risk patient.



#### **Physicians**

<u>WAC 246-919-980</u> Co-prescribing of naloxone. The opioid prescribing physician shall confirm or provide a current prescription for naloxone when opioids are prescribed to a high-risk patient.



#### Osteopathic Physician and Osteopathic Physician Assistant

WAC 246-853-785 Co-prescribing of naloxone. (1) The osteopathic physician shall confirm or provide a current prescription for naloxone when high dose opioids are prescribed. (2) The osteopathic physician should counsel and provide an option for a current prescription for naloxone to patients being prescribed opioids as clinically indicated.



### **Podiatric Physicians**

WAC 246-922-785 Co-prescribing of naloxone. (1) The podiatric physician shall confirm or provide a current prescription for naloxone when high-dose opioids are prescribed to a high-risk patient. (2) The podiatric physician should counsel and provide an option for a current prescription for naloxone to patients being prescribed opioids as clinically indicated.